WEEKLY BULLETIN

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

ESTABLISHED APRIL 15, 1[illegible]
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JUN 8 - 1942
University of California

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SACRAMENTO. STATE OFFICE BLDG., 10TH AND L STS., 2-4711 SAN FRANCISCO. 603 PHELAN BLDG., 760 MARKET ST., UN 8700 LOS ANGELES. STATE OFFICE BLDG., 217 W. FIRST ST., MA 1271

VOL. XXI, No. 18 MAY 23, 1942 GUY P. JONES
Editor

PHYSICAL DEFECTS IN SELECTEES

The Selective Service System has presented an analysis of the reports of physical examinations for each registrant examined under the Selective Training and Service Act of 1940. Pending the completed analysis, a survey has been made of 19,923 reports in order to provide an indication as to the physical fitness for military service of American youth between the ages of 21 and 36. This sample was stratified by States for representativeness and includes a cross section of registrants examined prior to May 31, 1941.

It must be recognized that the presentation of this analysis can have little effect upon the men who will go on the fighting line during this war. The physical defects encountered in these examinations reveal the weakness in the provision of adequate dental and medical services during the past 20 years. The results of these examinations are important at the present time because they provide an adequate guide toward the type of defects that must be corrected in children *now* and during the coming years. Health officers might well study the data presented by the Selective Service System in order that they may plan long-range programs for correcting physical defects that may be encountered in children of today. The next 20 years will require greater physical stamina and endurance than the years under which we are now living. The problems with which the next generation must cope will be stupendous. Whether or not the coming years bring physical warfare, the strains and hazards of peace will require strong bodies and strong minds. There must be no gap in the provision of adequate public health services during these difficult days. Even now the industries are preparing to train older men and women to take the places of young skilled workmen who must be sent to the battle fronts. It is even more important that every effort for the promotion of health in the youngest generation be expended now in order that there may be strong, physically fit citizens to meet the crucial days that lie ahead. Every possible attribute toward the promotion of public health must be provided at this time if the country is to have men and women fit to cope with the conditions of either peace or war under which they will live 15, 20 and 25 years from now.

The Selective Service System states that about 50 per cent of approximately 2,000,000 registrants who have been examined have been found unqualified for general military service by Selective Service local boards and Army induction stations because of physical, mental and educational reasons. Of the approximately 1,000,000 registrants who were not qualified for general military service, 900,000 were so classified because of physical and mental defects and 100,000 because of the lack of educational qualifications. Based upon present physical standards, about 1,000,000 out of 2,000,000 men examined were qualified for any type of military service in the Army immediately and at least 500,000, or 25 per cent, were available for the performance of military duties in a slightly limited capacity. Thus, 25 per cent were not qualified for any type of military service.

Dental defects constituted the principal cause of rejection. Out of 900,000 registrants not qualified for general military service, an estimated 188,000, or 20.9 per cent, suffered from dental defects. The next principal cause of rejection was defective eyes—123,000, or 13.7 per cent. Venereal diseases caused the rejection of 57,000, or 6.3 per cent, and defective feet, 36,000, or 4.0 per cent.

The following table gives the estimated number of registrants found unqualified for general military service and the percentage of the estimated total.

Major defect or disease	*Total unqualified for general military service*	*Percentage of estimated total unqualified for general military service*
Teeth	188,000	20.9
Eyes	123,000	13.7
Cardiovascular system	96,000	10.6
Musculo-skeletal	61,000	6.8
Venereal	57,000	6.3
Mental and nervous	57,000	6.3
Hernia	56,000	6.2
Ears	41,000	4.6
Feet	36,000	4.0
Lungs (including tuberculosis)	26,000	2.9
Miscellaneous	159,000	17.7
Total	900,000	100.0

The Selective Service System has been charged with the administration of a program for the physical rehabilitation of rejected men who can be completely and permanently rehabilitated at a reasonable cost and in a reasonably short period of time, and made available for general military services in the armed forces. It is estimated that 200,000 out of the 900,000 classified as available for limited military service can be completely physically rehabilitated for general military service. Probably 100,000 of these have dental defects that can be corrected successfully.

It is interesting to note that defects of the lungs, including tuberculosis, were responsible for the rejection of 26,000, or 2.9 per cent, which would indicate that the general program for the control of tuberculosis during past years has been remarkably efficient. The miscellaneous defects which accounted for 17.7 per cent of the total include defects and diseases of the mouth and gums, nose, throat, kidneys and urinary system, abdomen, genitalia, and skin, hemorrhoids, varicose veins, tumors, and infectious and parasitic diseases.

AGE DISTRIBUTION

Two-thirds of the registrants examined were between the ages of 21 and 27, inclusive. Those between the ages of 28 and 36 accounted for 31.3 per cent of the total. The rate of rejection between the ages of 31 and 36 was nearly twice as great as that for registrants between the ages of 21 and 25. Sixty-one per cent of those between the ages of 31 and 36 were unacceptable for general military service as compared with 45 per cent between the ages of 26 and 30, and 34 per cent between the ages of 21 and 25. The percentage *qualified* for military service varied from 70.5 per cent for registrants 21 years old to 29.9 per cent for registrants who were 36 years old at the time of the examination. It is a striking fact that more registrants in the younger age groups were qualified for general military service than those in the older groups.

RACE AND RESIDENCE

The ratio of Negro registrants to the total number was approximately the same as the ratio of Negroes to the total population. Two-thirds of the registrants examined were from urban communities. The rate of acceptance for general military service was 61.9 per cent for those from rural areas compared with 57.6 per cent for registrants from urban areas. Of all registrants examined, 97.3 per cent were born in the United States or its territories.

HEIGHT AND WEIGHT

The average height of the registrants examined was 67.5 inches, the average weight 150 pounds, and the average chest measurement at expiration was 33.9 inches. Those passed by local boards as available for general military service average 68.1 inches in height and weighed 152 pounds. For comparative purposes, it is interesting to note that the average height of recruits examined during World War I was 67.5 inches, the average weight was 142 pounds, and the average chest measurement at expiration was 33.2 inches.

VISION AND HEARING

Of the registrants tested for vision, 71 per cent could see as well as or better than normal, and 91 per cent had vision equivalent to or better than minimum requirements. Fewer registrants had as severe impairment of hearing as of vision. Ninety-five per cent who had their hearing tested possessed normal hearing or better, and 99 per cent could hear as well as was necessary for entrance into the Army.

OCCUPATION

Of the registrants physically examined, about 14 per cent were unemployed. The largest group of employed registrants, which comprised about one-fifth of all, were operatives and kindred workers such as chauffeurs, truck drivers and deliverymen, and operatives in metal, textile, and mining industries, such as weavers, knitters, spinners, assemblers, operators of lathes, drill presses, and other machines.

Farmers and farm laborers constituted the next largest group, accounting for 14 per cent of the total. Craftsmen and foremen comprised more than 8 per cent of all registrants examined. These consisted of carpenters, cabinet makers, pattern makers, mechanics, repair men, machinists, mill-wrights, tool makers, painters, paper hangers, printers and foremen.

Clerical and kindred workers made up nearly 8 per cent of those examined, with domestic, protective and other service workers constituting more than 5 per cent of those examined. Approximately 1 per cent of all registrants were students.

INCIDENCE OF DEFECTS

A total of 27,031 defects was tabulated from the 19,923 reports of physical examination, an average of 1.4 defects per registrant examined. No defects were recorded, however, for 5,741 registrants, or 29 per cent of the total number examined. At least one defect was recorded for 14,182 registrants, an average of 1.9 defects per registrant with defects. Two defects were recorded for 8,433 registrants and three defects were recorded for 4,416 registrants. A maximum of three defects per registrant was tabulated. More than one-half of the registrants qualified for general military service had nondisqualifying defects.

Defective feet accounted for a larger number of diseases and defects than any other section or system of the body, comprising 10.7 per cent of the total number of defects tabulated. Dental defects, which were the largest cause for rejection for military service, comprised 10.3 per cent of the diseases and defects; defects and diseases of the eyes, 8.6 per cent; skin diseases, 8.6 per cent; musculo-skeletal defects, 7.5 per cent; diseases and defects of the cardiovascular system, including diseases of the blood and blood-forming organs, 7.5 per cent; diseases and defects of the nose, 5.1 per cent; diseases and defects of the throat, 4.9 per cent; hernias, 4.8 per cent; diseases and defects of the mouth and gums, 4.7 per cent; abnormalities of the genitalia, 4.3 per cent; neurological defects and mental disorders, 3.9 per cent; defects of the ears, 3.2 per cent; venereal diseases, 2.6 per cent; hemorrhoids and rectal defects, 2.2 per cent; varicose veins, 2.0 per cent; endocrine disturbances, 1.2 per cent; defects of lungs, 1.2 per cent; diseases of kidneys and urinary system, 1.0 per cent; defects of abdominal viscera, 0.9 per cent; tumors, 0.8 per cent; tuberculosis, 0.4 per cent; and other diseases and defects, 3.6 per cent.

FACTS OF BIRTH ESTABLISHED FOR JAPANESE

During the past month more than 50 Japanese living in California have appeared in the superior courts of the State, together with their attorneys, for the purpose of establishing fact of birth. Some of these births occurred as long ago as 1897 and as recently as 1927. Since they were not registered within one year of their occurrence, it has been necessary for court action to be taken in order to establish fact of birth and citizenship.

PROVIDE CARE FOR CHILDREN NOW

The future of our Nation requires united action now to provide for all children:

1. The right start in life through healthy parents and good care for mothers during the maternity period.
2. Protective foods needed for health and growth.
3. Health supervision and medical and dental care.
4. Security of home life, through adequate income and understanding parental care.
5. Good schools offering a varied and flexible program to meet the needs of all children and youth.
6. Opportunities for wholesome leisure-time pursuits.
7. Safeguarding of youth at work and elimination of child labor, through effective administration of adequate legal standards.
8. Mother's care for infants and preschool children and for older children outside school hours; appropriate measures for care and supervision of children whose mothers are at work.
9. Social services to help meet the special needs of children whose well-being can not be fully assured by their families.
10. Freedom from demoralizing influences in the community.

NEWLY APPOINTED HEALTH OFFICERS

Dr. Robert T. McMahon has been appointed City Health Officer of Albany to succeed Dr. Martin J. Lacey.

Dr. O. T. Wood has been appointed City Health Officer of Red Bluff to succeed Dr. Donald E. Thompson.

DECONTAMINATION OF EYES AFTER EXPOSURE TO LEWISITE AND MUSTARD

Since publication of the Office of Civilian Defense handbooks, "First Aid in the Prevention and Treatment of Chemical Casualties" and "Protection Against Gas," further experience has shown that the 2 per cent of hydrogen peroxide recommended for the treatment of eyes following Lewisite burns may be injurious if used undiluted. The Chemical Warfare Service now recommends a single instillation in the eyes of a 0.5 per cent solution of hydrogen peroxide as soon as possible after contamination with Lewisite. This solution may be prepared by diluting one part of a 2 per cent solution with three parts of water, or one part of a 3 per cent solution with five parts of water. The solution usually found in drug stores is the U. S. P. strength of 2.5 to 3.5 per cent hydrogen peroxide. A 0.5 per cent solution of potassium permanganate has also been found effective as an eye instillation following exposure to Lewisite.

In planning decontamination stations, the Medical Division, Office of Civilian Defense, recommends that provision be made near the entrance of the second or shower room for the irrigation of the eyes of contaminated persons. The schematic sketch of a decontamination station in the Office of Civilian Defense publications mentioned above shows the irrigation of eyes in the dressing room, whereas this should be carried out in the second or shower room before the bath is given. Delay until the casualty reaches the dressing room will result in more serious injury to eyes which have been contaminated with mustard or Lewisite.

MORBIDITY*

Complete Reports for Certain Diseases Recorded for Week Ending May 16, 1942

Chickenpox

1350 cases from the following counties: Alameda 209, Contra Costa 12, Fresno 15, Humboldt 1, Inyo 12, Kern 42, Kings 1, Los Angeles 352, Madera 2, Marin 8, Mendocino 49, Merced 1, Orange 29, Placer 5, Plumas 6, Sacramento 41, San Bernardino 142, San Diego 185, San Francisco 76, San Joaquin 30, San Mateo 14, Santa Barbara 19, Santa Clara 36, Solano 3, Sonoma 9, Stanislaus 16, Trinity 5, Tulare 10, Ventura 19, Yuba 1.

German Measles

2183 cases from the following counties: Alameda 504, Butte 4, Contra Costa 12, Fresno 25, Inyo 1, Kern 39, Kings 29, Los Angeles 247, Madera 3, Marin 11, Merced 3, Mono 1, Orange 32, Plumas 5, Sacramento 14, San Bernardino 47, San Diego 257, San Francisco 426, San Joaquin 220, San Luis Obispo 42, San Mateo 47, Santa Barbara 38, Santa Clara 83, Solano 7, Sonoma 34, Stanislaus 22, Sutter 2, Tulare 26, Yolo 1, Yuba 1.

Measles

5649 cases from the following counties: Alameda 692, Butte 11, Colusa 21, Contra Costa 37, Fresno 179, Glenn 24, Humboldt 1, Inyo 42, Kern 76, Los Angeles 2013, Madera 36, Marin 11, Mariposa 3, Mendocino 16, Merced 69, Nevada 3, Orange 278, Plumas 3, Sacramento 101, San Benito 1, San Bernardino 232, San Diego 775, San Francisco 375, San Joaquin 60, San Luis Obispo 40, San Mateo 96, Santa Barbara 48, Santa Clara 132, Santa Cruz 2, Shasta 16, Siskiyou 4, Solano 23, Sonoma 58, Stanislaus 66, Sutter 8, Tehama 8, Trinity 2, Tulare 34, Ventura 46, Yolo 4, Yuba 3.

Mumps

1998 cases from the following counties: Alameda 257, Contra Costa 21, Del Norte 1, Fresno 98, Humboldt 5, Inyo 1, Kern 23, Kings 6, Los Angeles 344, Madera 35, Marin 7, Mendocino 17, Merced 10, Mono 1, Napa 1, Orange 57, Placer 2, Sacramento 54, San Bernardino 324, San Diego 213, San Francisco 148, San Joaquin 124, San Luis Obispo 22, San Mateo 32, Santa Barbara 5, Santa Clara 110, Siskiyou 1, Solano 10, Sonoma 14, Stanislaus 13, Sutter 4, Tehama 16, Tulare 15, Ventura 6, Yuba 1.

Scarlet Fever

81 cases from the following counties: Alameda 4, Butte 2, Contra Costa 2, Fresno 15, Kern 1, Los Angeles 26, Madera 1, Merced 1, San Bernardino 6, San Diego 2, San Francisco 10, San Joaquin 1, San Luis Obispo 1, Santa Barbara 5, Santa Cruz 2, Tulare 1, Yuba 1.

Whooping Cough

313 cases from the following counties: Alameda 28, Fresno 21, Humboldt 5, Inyo 2, Kern 16, Kings 2, Los Angeles 60, Marin 1, Orange 5, Sacramento 34, San Bernardino 11, San Diego 28, San Francisco 21, San Joaquin 20, Santa Barbara 25, Santa Clara 16, Shasta 1, Stanislaus 1, Tulare 15, Ventura 1.

Coccidioidal Granuloma

2 cases from Kern County.

Diphtheria

11 cases from the following counties: Alameda 1, Merced 1, Sacramento 1, San Bernardino 3, San Diego 1, Sonoma 4.

Dysentery (Bacillary)

One case from Los Angeles.

Encephalitis (Epidemic)

One case from Kern County.

Epilepsy

36 cases from the following counties: Alameda 1, Los Angeles 27, Sacramento 1, San Bernardino 1, San Francisco 2, San Joaquin 1, Solano 1, Sonoma 2.

Food Poisoning

3 cases from the following counties: Los Angeles 1, Solano 2.

Influenza

52 cases reported in the State.

Jaundice (Epidemic)

5 cases from Los Angeles County.

Malaria

4 cases from the following counties: Los Angeles 1, Marin 1, San Diego 1, San Francisco 1.

Meningitis (Epidemic)

9 cases from the following counties: Los Angeles 3, Sacramento 1, San Diego 2, San Francisco 3.

Paratyphoid Fever

One case from Los Angeles County.

Rabies (Animal)

8 cases from the following counties: Fresno 3, Los Angeles 4, San Diego 1.

Rheumatic Fever

4 cases from the following counties: Los Angeles 3, Sonoma 1.

Trichinosis

One case from Los Angeles County.

Typhoid Fever

4 cases from the following counties: Alameda 1, Los Angeles 2, San Diego 1.

Typhus Fever

One case from San Diego County.

Undulant Fever

3 cases from the following counties: Fresno 1, Los Angeles 1, San Bernardino 1.

Man's intellectual and spiritual destiny is in no small degree determined by what and how he reads. As reading is a mark of civilized peoples, so is it of individuals who grow and progress. Its importance, which arose with the art of writing, mounted rapidly after the invention of printing, and reached its present climax through the wide diffusion of books.—Leon J. Richardson.

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* Data regarding the other reportable diseases not listed herein, may be obtained upon request.

printed in CALIFORNIA STATE PRINTING OFFICE
SACRAMENTO, *1942* GEORGE H. MOORE, STATE PRINTER 11677 5-42 7500

University of California
Medical Library,
3rd & Parnassus Aves.,
San Francisco, Calif.